

UTILITY PATENT APPLICATION TRANSMITTAL

DUPLICATE

Address to:	Attorney Docket No.	KOUY3001/EM
Box PATENT APPLICATION		First Named Inventor (or identifier)
Commissioner of Patents		Youseok KOU
P.O. Box 1450		Total Pages
Alexandria, VA 22313-1450		30

15424 U.S. PTO
10/642294
08/18/03

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled:	Method For Controlling Anti-Roll/Anti-Yaw Of Vehicles
-----------	---

1. Submitted herewith are the following:

12 pages of specification, including claims and Abstract.
 2 sheets of FORMAL drawings (Figs. 1-2).
 3 claims.
 1 Oath/Declaration signed by each inventor.
 1 Application Data Sheet.
 1 Assignment of the invention to Mando Corporation, Kyonggi-do, 451-821, Korea,
 Cover Sheet, and payment of the \$40 recordal fee.
 1 certified copy of Korean appl no. 10-2002-0049218. Priority is claimed.
 1 check in the amount of \$790 (\$750- Filing Fee; \$40- Assignment Recordation Fee).

2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.

3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

4. Insert before the first sentence of the specification: -- This application claims the benefit of provisional application number _____ filed _____. --

5. Insert before the first sentence of the specification: -- This application is a Continuation-in-part of nonprovisional application number _____ filed _____. --

6. Other: _____

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:

Basic Fee: \$750.00

Total Claims:	3	- 20 =	0	X \$18 =	\$0.00
Independent Claims:	1	- 3 =	0	X \$84 =	\$0.00

Correspondence Address:
BACON & THOMAS, PLLC
 625 Slaters Lane, 4th Floor
 Alexandria, VA 22314-1176

23364
CUSTOMER NUMBER

Multiple Dependent Claim (add \$280.00): \$0.00

Subtotal: \$750.00

50% Reduction if Small Entity Status: \$0.00

Phone: 703-683-0500	Fax: 703-683-1080	Total:	\$750.00
---------------------	-------------------	--------	----------

Date:	Name:	Signature:	Reg. No.
August 18, 2003	Eugene Mar		25,893